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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission		Attorney Docket Number	040143-000400US
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### ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard, copies of three cited co-pending applications
Remarks      The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Townsend and Townsend and Crew LLP Irvin E. Branch	
Signature		
Date	9/28/2004	

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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On SEPT 29, 2004

TOWNSEND and TOWNSEND and CREW LLP

By: Michael W. Diesch



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Timothy E. Beres et al.

Application No.: 10/804,467

Filed: March 18, 2004

For: DOCUMENT ORGANIZATION  
AND FORMATTING FOR DISPLAY

Examiner: Not Yet Known

Art Unit: Not Yet Known

**INFORMATION DISCLOSURE  
STATEMENT UNDER 37 CFR §1.97 and  
§1.98**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Applicants wish to make the Examiner aware of the following co-pending patent applications:

1. U.S. Patent App. No. 10/876,250, filed 6/23/2004, Applicant Timothy E. Beres et al., Attorney Docket No. 040143-000700US;
2. U.S. Patent App. No. 10/804,468, filed 3/18/2004, Applicant Timothy E. Beres et al., Attorney Docket No. 040143-000300US; and
3. U.S. Patent App. No. 10/804,472, filed 3/18/2004, Applicant Michael W. Diesch, et al., Attorney Docket No. 040143-000200US.

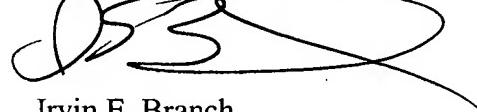
To comply with 37 CFR §1.98(a)(2)(iii), the specifications, drawings and claims for each of these applications are enclosed.

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



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